

MY PETS (Continued)

Veterinary Care

Current Vet Name: _____

Phone: _____

Address: _____

Below is the request for the placement of my pets:

Pet Name: _____

Give to: _____ Phone: _____

_____ Do to pet age and/or health please put to sleep

Pet Name: _____

Give to: _____ Phone: _____

_____ Do to pet age and/or health please put to sleep

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Give to: _____ Phone: _____

_____ Do to pet age and/or health please put to sleep

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